

# California Dreaming

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Working with physicians still having to fight here and there for a level playing field, the Board of Podiatric Medicine has had the luxury of little attachment to *the Status Quo*. That sacrament of State capitals, once the byword of the International Association of Professional Bureaucrats (INATAPROBU), before it discovered even “the *status quo* may be too progressive,” is like ye ol’ brick wall.



Bertrand Russell noted that many can be “roused to fury by departure from convention, largely because they regard such departure as a criticism of themselves.”

So taking stock of our progress instead of just fixing on the landscape ahead, like a Quixote approaching Altamount Pass, might do some good.

## Enforcement

Enforcement was hotly controversial as the medical and affiliated health boards emerged from Sacramento’s backwaters in the early 1990s. The Legislature, media and the public demanded better management. The California

Podiatric Medical Association (CPMA) board pounded on me from the start to crack down on scofflaws harming the public. So had the BPM Board in the hiring interview.

Fighting for change, new Department of Consumer Affairs (DCA) Director Jim Conran found support at BPM and called it “a Model Board, setting examples I wish other boards would follow.”

BPM’s initiatives, often hard-fought and bitterly opposed, included:

- being the first state agency to support Senator Robert Presley’s bills to reform physician discipline, sponsored by the Center for Public Interest Law
- first MBC-affiliated health board to hire a full-time Enforcement Coordinator
- the Enforcement Matrix Report eventually used to clean up the Medical Board’s data base and eliminate backlogs, being a tool for meaningful analysis, oversight and accountability
- using the law effectively

The number of pulled DPM licenses rose from just **two** in the 1950s (the entire decade), another **two** in the 1960s, **seven** in the Seventies, and **19** in the Eighties to **43** during the Nineties (more than in our entire past history combined).

In a small medical specialty like podiatric medicine, that had an impact.

People stopped asking: “Why can’t the Board do something?”

The day of a few notorious providers flouting the profession’s standard of care and seemingly beyond the reach of the law was over.

### Licensing

Despite the focus on enforcement, licensing should not be left a stepchild. Licensing boards can do much to *prevent* patient harm rather than just respond to it after the fact once lasting harm is done.

BPM’s program has lifted podiatric medicine into essentially being an elite medical specialty. The Board is:

- the only doctor-licensing board in the state to require two-years of graduate medical education (GME) rather than just one
- the only doctor-licensing board in California to require GME residents to qualify for and possess a resident’s license
- the only doctor-licensing board to require all California GME programs to apply for approval annually by documenting compliance with CPME and ACGME institutional standards
- the only doctor-licensing board in our state to write primary source verification standards for licensing requirements into the law (preventing waivers, blind trust of applicants, and outright fraud)
- the only doctor-licensing board in the U.S. to require licensees to meet at least one peer-reviewed indicator of continuing competence over and above CME at each two-year renewal

With this in place, and despite increasing (but still inadequate) outreach and public knowledge that our boards exist, the annual number of complaints about podiatric medical care is showing steady longitudinal decline, from 271 in 1999 to 107 last year.

### Windmills Ahead!

The giants seen blocking good public administration are illusory. We can do it.

The “smart” bureaucratic path of least resistance, however, is not the way. That will not achieve the many unmet goals of our *Strategic Plan*, which you can view online at [BPM.ca.gov](http://BPM.ca.gov).

The *Status Quo* will not deliver Californians the quality they deserve.

Boards can:

- seek alliances
- chart safe courses through difficult water
- follow anyone who leads
- lead themselves, and
- try and try again

